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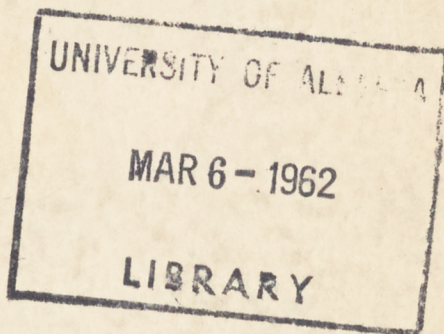


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**Sixth
Annual**

Progress Report



Period:

January 1, 1959

December 31, 1959

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1959

**E ALCOHOLISM
FOUNDATION OF ALBERTA**

The Alcoholism Foundation of Alberta was incorporated under the Societies Act on September 27th, 1951. In 1953 the first clinic and Provincial Administrative Centre was opened in Edmonton. A second clinic was established in Calgary in 1954 to more adequately serve the needs of the southern areas of the province.

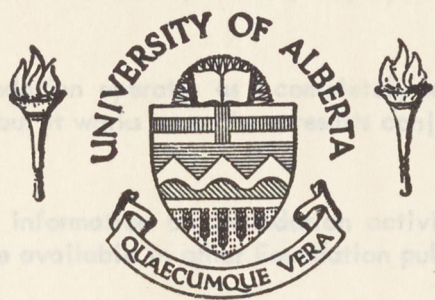
The Foundation is a non-profit, private agency supported by provincial and municipal grants, and membership donations from companies and individuals. The Foundation maintains broad programs of education and research. The goal of these programs is the prevention of alcoholism.

A medical examination, if prescribed, is paid for by the Foundation. Assistance may be extended to a patient denied treatment for alcoholism. The Foundation provides guidance services and referrals to other contacts.

The Foundation provides a fellowship for the study of Alcoholics Anonymous.

Details of the Foundation's supplementary reports are available upon request.

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supported by associations, the Foundation maintains these programs.

This covers medication, if necessary, and assistance to a patient denied treatment. There is no charge for any collateral services.

The Foundation is an entity from which the University of Alberta receives its funds.

The Foundation provides services and information to the public.

SIXTH
ANNUAL PROGRESS REPORT

January 1, 1959 - December 31, 1959

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1959



THE ALCOHOLISM FOUNDATION OF ALBERTA

Provincial Administrative Offices
9910 - 103rd Street
Edmonton

TREATMENT CENTRES

CALGARY
737 - 13th Avenue, S.W.
AMherst 9-6101

EDMONTON
9910 - 103rd Street
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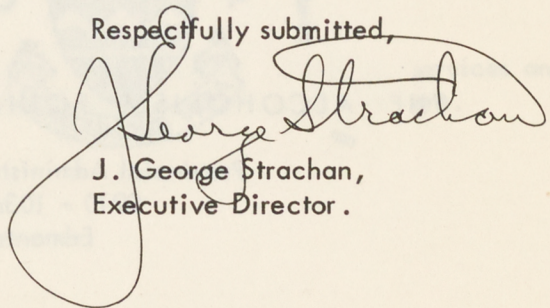
To:

Mr. S.A. Keays, President,
The Alcoholism Foundation of Alberta,
Edmonton, Alberta.

It is my privilege to present this, the Sixth Annual
Progress Report on the activities of The Alcoholism Foundation
of Alberta, to the Membership and Board of the Foundation.

This report reviews the services of the Foundation for
the calendar year January 1, 1959 through December 31, 1959.

Respectfully submitted,



J. George Strachan,
Executive Director.

May 1, 1960

LIBRARY OF THE UNIVERSITY
OF ALBERTA

PRESIDENT'S MESSAGE

As I close this, my second year of service as President, I am pleased to report that many of those projects which we had hoped to accomplish have now been realized. This would never have been achieved without the co-operation of the Cabinet, and indeed of all groups and parties of the Provincial Government, who have, in this current session of the Legislature, generously increased our grant. In the last two years, in order to extend our services, we budgeted for a calculated deficit. The increased grant will enable us to absorb that deficit, consolidate our activities, and stabilize our position.

Evidence of a busy year's activity is contained in the following Annual Report. All departments of the Foundation show a strengthening of their role and give promise of much future development. Treatment and education services should be benefited through such meaningful studies and evaluation which an established Research Department may now accomplish. We now have the staff complement and the services to deal more adequately with the problems of alcoholism as they affect the people of Alberta.

A recent campaign to raise initial research funds, ably co-chaired by Mr. George L. Crawford and Mr. Dennis K. Yorath, had the assistance of many busy people in business and industry in both Edmonton and Calgary.

It is gratifying to retire as President with so many matters resolved. The achievements of the Foundation have been made through the total team effort of the membership, Board, and staff, encouraged by the stimulating support of many private interests, individuals, groups, and business and industry, throughout the province.

I wish to thank all those concerned for their devoted service to the work of the Foundation and for doing so much to make my term of office personally very gratifying.

S.A. Keays

EXECUTIVE DIRECTOR'S REPORT

1959 was a successful year for the Foundation, a year in which many of our purposes were clarified and some long-planned projects achieved.

Essential to the development of the Foundation's program is the need to achieve and maintain a good climate of opinion in which to operate. That we have largely achieved this good working atmosphere is shown by the continuing requests for assistance with problem drinking situations, and for our information services from individuals and groups across the province. In the services report on page 12, an account of the year's Educational activities will be found. The considerable rise in the number of requests for our educational services is an indication of the need for, and the success of, our approach.

This improved public attitude carries with it the responsibility that we continue to stimulate interest and understanding, by training more professional workers, by disseminating further information, and by providing factual material on problems of alcohol, drinking, and alcoholism. This further necessitates our sponsoring sound and non-controversial community preventive activities, such as those newly established in Medicine Hat and Lethbridge. A full account of the developing activities in these two cities is given in the community services report on page 6.

Our Treatment Program continues to develop more adequate therapeutic techniques. Although the number of alcoholics demanding treatment in 1959 declined, this has permitted more adequate counselling for the individual patient. A full report of the Treatment Department activities will be found on page 8.

The Research Department in 1959 carried out intensive internal assessment, a study of alcohol consumption in Alberta, and detailed planning of future research projects which are described in the Research Report on page 14.

During this year our ultimate goal of prevention has

undergone a new formulation. In the past we have placed heavy emphasis on an educational program as the most effective factor in prevention. In addition, the treatment program, which is concerned not only with treatment, but also with early case finding, and the study program which supplies important preventive material, operated as secondary prevention agents. In future, we intend to develop a preventive program based on a careful integration of education, research, applied sociology, and treatment, with the ultimate goal of finding methods and techniques which will impart reality to the idea of prevention.

As Director I regularly restate without fear of contradiction, that we in Alberta enjoy the resources and abilities to achieve more progress than most agencies in this field. The progress we have made is ample evidence of this fact. It may be said without hesitation that we have earned the interest and support of most related bodies in the Province including our Provincial and Community Governments, the University, the Professions, Alcoholics Anonymous, and the public at large. There is therefore every reason for us to believe that we will continue to establish a regime of activity that will provide a most meaningful contribution to the people of our Province, and will lead to the eventual prevention of this public health problem.

The success of efforts in control of other illnesses does indicate what can be accomplished when all available resources are concentrated on a health problem through the concentrated efforts of various essential teams. Alcoholism is still the one illness whose complexity and complications require every measure of continuing interest and co-operation from everyone, if we are to cope with the magnitude and the seriousness of this illness. At one time an approach to this illness was well nigh impossible because alcoholism had the least consideration of all concerned, the least time, money, or energies, expended on its treatment. Today this is changing.

Our revised prospectus therefore, is one that holds hope for greater purpose in the future. As attitudes and the status of support continues to improve, it should be possible for us to place this illness, alcoholism, in its proper perspective and to

establish the treatment and prevention of alcoholism on a par with every other illness.

ACKNOWLEDGEMENTS

During the 1959 session of the Alberta Provincial Government Legislature, the Foundation was recognized by the unanimous decision of all parties, as the authoritative body in the field of alcoholism for the province. As I write this report, the Government has seen fit to approve our recommendations for future programming and our requests for further assistance and have most generously increased our grant. We would have achieved little of our success without the continuing interest, co-operation, and generous support of our Provincial Government. I extend the gratitude of all of us to the Premier, the Honorable Mr. E.C. Manning, to the Minister of Health, the Honorable Dr. J. Donovan Ross, and to the other members of the cabinet and of the legislature.

In these years of service as Executive Director, I have always enjoyed a close and warm working relationship with the Executive and Board. Their continued association and remarkable interest in the activities and work of the Foundation has been a constant stimulation to all of us. This too is true of our Advisory Committees, particularly the Medical, Finance, and Treatment Committees. During the past year we saw the retirement from the Board of the Foundation of Dr. Andrew Stewart and the retirement of Dr. John W. Scott as chairman of the Medical Advisory Committee. Both served with Dr. J. Donovan Ross as founders of the Foundation, and have given unstintingly of their time and energies to the work of the Foundation. The Board, too, lost the able services of Mr. D. E. Batchelor, the Right Reverend J.M. Malone, and Mr. Vernon Taylor.

It is with real regret that we recall the death of Dr. Jake Andreas of Wetaskiwin, an old friend and supporting member of the Foundation.

May I also acknowledge the excellent support of the membership, and of all those many people throughout the prov-

ince who have assisted us in our activities.

During 1959 the Foundation was most fortunate in securing the Advisory services of the international authority on alcoholism, Dr. E.M. Jellinek. Dr. Jellinek as Chief Consultant is now a member of the staff. He has also been appointed Honorary Clinical Professor in Psychiatry by the University of Alberta, where he is lecturing on alcohol and alcoholism.

Other new staff members are: Mr. R.W. Jones, Associate Director, Research; Mr. C.R. Dickey, Information Officer; Mrs. W.M. Aldridge, and Mrs. M. Lasserre, Counsellors; Mr. R.T. Dorris, Counsellor, who resigned in April 1960 to return to California; Miss C.J. Holloway, Mrs. M.J. McNeely, Mrs. I. Stannard, and Miss E.E. Stobee, secretaries.

Miss Doreen Stith, Secretary to the Executive Director for almost seven years resigned to take a trip to Europe. Miss Catherine McGuire, Supervisor of Treatment for the Edmonton clinic resigned to return to university. Mrs. Hanna Lewis, Associate Director, Educational Services, resigned to return to the teaching profession.

My sincere and genuine gratitude is expressed to the staff of the Foundation, who so well perform, individually and collectively, all of those tasks which make our work so meaningful and gratifying.

J. G. Strachan

COMMUNITY SERVICES

During 1959 the Foundation developed community services in Medicine Hat and Lethbridge. The selection of Lethbridge and Medicine Hat for this purpose followed logically since both centres represent the second and third largest communities in the province. Furthermore, they are easily accessible from our Calgary Clinic and during the spring of 1958 orientation seminars had been conducted by the Foundation in both cities, thereby establishing a high level of public interest and awareness in the problem of alcoholism as it existed in these communities.

The first step towards the implementation of the actual planning, which extended over a two year period, and in fact the main element essential for sustaining programming, was the establishment of Community Advisory Committees to the Foundation in these two southern cities. These evolved as representative groups of community minded citizens, realistically concerned about the problem of alcoholism in their communities, and in consequence desirous of lending organized assistance towards furthering the treatment of the alcoholic and the provision of factual information on alcoholism and its related problems at the public level. Diversification of professional and vocational interests became fundamental in the selection of committee members in order to afford the Foundation as representative an advisory group within the community as possible. In fulfillment of this, therefore, each committee drew largely for its membership from the medical, legal, judicial, clerical, teaching, and nursing professions, as well as personnel from the ranks of municipal government and from business and industry.

Through a series of institutes specifically adapted to the orientation of such representative citizens, the Foundation was able to provide each city with a well-informed group capable of taking leadership in further establishing an awareness, knowledge, and understanding of the problem of alcoholism within the communities.

The members of the Advisory Committees thus became competent to refer persons with alcohol problems to the Foundation for treatment, or to other community resources for the resolvment of concomitant problems. The Advisory Committees of both Lethbridge and Medicine Hat have been successful in obtaining suitable accommodation for the Foundation's monthly clinical consultant service in their respective municipal hospitals, and medical consultants to the Foundation have been obtained from the medical members of the Committees. In addition both communities have established central referral and appointment centres located in the Medicine Hat Health Unit and the Lethbridge Municipal Hospital.

Both Advisory Committees have become increasingly effective in furthering the Foundation's public education program through continuous planning of educational activities in the general areas of medicine, business and industry, church, law enforcement, and social agencies.

With the inception of our programming in both these communities, and the experience we have gained through the able co-operation afforded us through the Advisory Committees, we are now in a position to extend similar programming to other areas of the Province in further recognition of our responsibilities as a provincial Foundation.

J.P. Matheson

TREATMENT ACTIVITIES

In addition to the 125 patients undergoing active treatment when 1959 opened, services were extended to 521 new patients and to 169 former patients who returned during the year for further counselling. Total annual intake during the last three years has been relatively stable and may indicate that a plateau has been reached in the demand for services within the present service areas of Edmonton and Calgary. If so, this will permit greater attention to be paid to the development of treatment services in outlying areas.

Counsellors conducted a total of 5,819 individual interviews during the year. An examination of our records indicate that on the average five out of every six interviews were with patients and one out of every six was with a family member, usually the spouse. About 200 interviews were conducted during the year with the alcoholics' friends, employers, doctors, and ministers.

Group therapy sessions were well attended throughout the year with a substantial number of wives or husbands accompanying the patients to these sessions.

RECOVERY TRENDS

The criteria used for classification of patients and for evaluation of their response to treatment has been detailed in previous reports (see Fourth Annual Report or the Five Year Review). The proportion of patients in the 'recovery indicated' group (very good, plus progressive, plus partial) to the end of 1959 is 56%. There has been a steady increase in the proportion of patients in the 'recovery indicated' group from 47% to the end of 1955 to 56% to the end of 1958. The 1958 and 1959 'recovery indicated' percentages are almost identical. Whether this indicates a temporary or permanent levelling off in what has been a consistently rising proportion of 'recovery indicated' patients is difficult to assess until the end of at least another year of operation.

CHARACTERISTICS OF PATIENT LOAD

The social characteristics of the patients remained relatively unchanged from the previous year. 60% of the new patients during 1959 were married and living with their families, and 60% were employed at the time of application for treatment. Again the social histories of those who were unemployed at the time of contact indicate that, in the lives of a substantial proportion, job loss and periods of unemployment are a recent development.

Applications for treatment from the chronically indigent and recidivist groups has not increased over last year. It may be that, although our present treatment program can be relatively effective with a great majority of alcoholic patients, in the main it evokes a less positive response from the chronically indigent and recidivist type of patient. The problem of involving this group of patients effectively in treatment activities was the topic of a series of treatment staff conferences. It is felt that a treatment program which can be effective with the large group, that is 90% to 95% of the total alcoholic population, will not in the main be effective with the advanced dis-socialized group and vice versa; the latter group requires specialized treatment facilities often involving periods of supervised bed-care, and in nearly all cases a fairly extensive period of residential care in a therapy milieu. Although the cost per patient of providing such treatment is comparatively high and the percentage of successful response to treatment may be relatively low, it is not, from a long term point of view, as costly to the community as the failure to provide specialized treatment facilities for this group.

During 1959 there was a marked increase in the proportion of women alcoholics applying for treatment. From 1955 to 1958 the woman patient comprised about 9% of all applicants, but this last year the proportion is 13.5%. This indicates, it is hoped, that public educational efforts are not only reaching the woman alcoholic, but are also making it easier for her to come for treatment.

A. W. Fraser

MEDICAL ACTIVITIES

The Medical Department operates as part of the team approach to the treatment and rehabilitation of the alcoholic. The treatment of alcoholism at the Foundation is on an out-patient basis. Many patients are first seen when they are sober and have recovered from the withdrawal symptoms of drinking large amounts of alcohol. At this stage they are frequently healthy people, who may well have had a recent check-over by their family physician or company doctor. Few have symptoms requiring the continued attention and judgment of a nurse, physician, or psychiatrist.

The general policy of the Medical Department is to have all new patients initially seen by both the nurse and the physician. During the years there have been variations in the pattern of referrals to the Medical Department. This has been due in part to changes in policy and in part to the available time of the Medical Department staff. During the past year we have seen fewer acutely ill alcoholics at the Foundation. At the Edmonton clinic the nurse was utilized as an intake worker for several months, and the physician changed his time to one full afternoon and part of one afternoon per week. We feel that these factors accounted for the decrease in medical services as evidenced by the statistical tables. Once again we are in the process of re-evaluating and adjusting procedure in the Medical Department, and we expect to report definite advances in service for the coming year.

Outside the Foundation the physicians remain active in providing consulting service to other doctors and helping with hospital cases. We plan to increase this activity as well as other community and Foundation medical services.

Plans are also in process to increase the lecture time in alcoholism to the fourth year Medical students at the University of Alberta. The present plans are to provide six hours of didactic lectures, followed by a two hour work shop. This will increase the time for medical students from two hours to seven hours. A continuing program of lectures and seminars

for nurses and nursing aides has been established and was very well received during this past year.

We expect 1960 will bring significant and important changes as we continue to improve and advance in our various approaches to this vast and important problem of alcoholism.

David M. Bell, M.D.

EDUCATIONAL ACTIVITIES

1959 saw a marked increase in the activities of the Educational Services of the Foundation. Each year since inception, requests for talks, seminars, orientation courses, and advisory services, have been increasing. In 1958 we gave 146 talks and orientation courses; in 1959 this had risen to 202, with a total attendance of nearly 9,000.

The following represents a summary of some of the more outstanding events.

AGENCIES

Numerous requests for services from many different social agencies in Edmonton, Calgary, and other centres in Alberta were received. Talks were given to the Canadian Association of Social Workers, The John Howard Society, The Council of Social Services, and the Marian Centre. Several meetings were held with the Council of Community Services and Local Community Advisory Committees in both Medicine Hat and Lethbridge preparatory to setting up educational and treatment facilities in those cities early in 1960.

CHURCH

Churches of many denominations requested the educational services of the Foundation. Talks were given to Anglican, Baptist, Catholic, Mennonite, Presbyterian, United, and other church groups.

In the spring of 1959 a seminar for Anglican Clergymen was held in Edmonton. Over a period of four months, lectures on the problem and the clergymen's role were given and discussions took place.

MEDICAL

Several meetings with the medical profession were held in 1959. In September Dr. E.M. Jellinek addressed the Alberta Division of the Canadian Medical Association and, in October, 300 members of the Academy of Medicine. Talks were given to

Medical Officers of Health, General Hospital Administrative Staff, and the Edmonton Psychiatric Association. Arrangements were made for a 1960 course on alcoholism to fourth year medical students at the University of Alberta to be given by Dr. Jellinek. Graduate and Student Nurses from several Alberta Hospitals attended courses on alcoholism, including: the Calgary General and Holy Cross Hospitals, the Edmonton General, Misericordia, Royal Alexandra, and University Hospitals, the Lethbridge St. Michael's Hospital, and the Medicine Hat General and Municipal Hospitals.

Nursing Aides regularly attend the Foundation for talks and orientation as a part of their training.

SERVICE CLUBS

The following Service Clubs in Edmonton and Calgary were addressed by Foundation Staff: The Active, Cosmopolitan, Kiwanis, Lions, Rotary, and Soroptomist Clubs; the Men's Canadian Club, and the Junior Hospital League.

PUBLICATIONS

In 1959 three Foundation periodicals were first published. Progress, published five times a year, has a circulation of 5,500. Material of interest to doctors, clergymen, magistrates, social workers, teachers, other professional groups, and the lay public, appears in each issue.

The Digest on Alcohol Studies and Alcoholism, appears irregularly when there is sufficient worthwhile specialized material for doctors, clergymen, social workers, business and industry and legal and law enforcement readers.

News Review, published four times a year, contains short newsworthy reports of current activities of the Foundation and of other alcoholism programs throughout the World.

Two other important publications produced in 1959 were: A Five Year Review of Foundation activities, prepared by the Research Department; and The Past, Present, and Future of Alcoholism Programming in Alberta, a pamphlet containing a summary of our achievements and goals.

T. G. Coffey

RESEARCH ACTIVITIES

The major aim of the Foundation's program is the prevention of alcoholism. Our research work is, therefore, primarily designed to develop basic information on which a broad range educational and treatment program can be based.

During the past year the Research Department has directed most of its efforts toward the development of good research designs. Consequently, we completed only a few studies. Most important among these was a study on consumption patterns in Alberta (the summary of which appeared in PROGRESS, Volume 1, Number 2), and an evaluation of group therapy. In addition, the Research Department made a number of evaluations of a wide range of treatment activities.

CONTINUING STUDIES

The major study undertaken in the past year and continuing at the present time is of the geographic distribution of patients seen in the Calgary and Edmonton Treatment Centres. The study is limited to those patients who achieved case status in the first six years of operation of the Centres. The data collected will be compared to census tract and census division material to determine the similarities and differences between our patients and the total population. The study should also indicate to some extent those areas of the Province in which the Foundation's program is more effective and those areas in which it is weak. From this study we hope to obtain meaningful indications for further research and for further education and treatment activity.

The second study, which has reached the design stage, is intended to obtain a first approximation of the effects of advertising on introducing people to drinking. If our design proves satisfactory, we hope to put the study into the field, using very small samples, in the fall of 1960.

PROPOSED STUDIES

The first major proposed study is an evaluation of the effects of introducing educational and treatment programs into small communities. We intend to make a controlled study of not only the educational and treatment programs, but also of the effects of doing the research itself.

A second study is of drinking patterns in Alberta. We hope to obtain a clear understanding of the social function and role of beverage alcohol in the Province of Alberta by learning about the social controls and sanctions around drinking, and about the ethnic, religious, economic, ecological, and demographic factors related to the use of beverage alcohol.

A third study is of the distribution of deaths from cirrhosis of the liver. Since cirrhosis deaths comprise the basic datum from which estimates of alcoholism are made, it is important to know how these deaths are reported, and what their distribution in the Province is.

Another study is of the relation between alcoholism and tuberculosis. This study is only in the design stage and consequently it is difficult to predict exactly what may be anticipated from it. If experiences in other parts of North America are indicative, then we may anticipate some very important findings from an examination of alcoholic and tuberculous patients, particularly as regards the difficulties of treating persons suffering from both diseases.

R.W. Jones

STATISTICAL HIGHLIGHTS

Table 1: TOTAL FILES OPENED

	1959	1953-1959
Edmonton Centre	276	2819
Calgary Centre	245	1323
Total	521	4142

Table 2: TOTAL CASE FILES OPENED

	1959	1953-1959
Edmonton Centre	102	903
Calgary Centre	84	503
Total	186	1406

'Case status' is assigned to patients who persist in treatment to a 'significant' extent (defined as a minimum of three individual counselling sessions). Surveys indicate that cases receive an average of ten interviews and attend several group therapy meetings. Recovery trends are calculated on the basis of case status patient response to treatment. (For standards and methodology see A FIVE YEAR REVIEW.)

Table 3: RECOVERY TRENDS, INCEPTION TO DATE, EDMONTON AND CALGARY CENTRE CASES COMBINED

Recovery Indicated 56%	Very Good Recovery	17%
	Progressive Recovery	10%
	Partial Recovery	29%
No Recovery Indicated 36%	Unimproved	29%
	Other Problems	7%
Active 8%	Under Treatment	8%

PATIENT DATA

Table 4: SEX

	1958	1959
Male	90.5%	86.4%
Female	9.5%	13.6%

Both the number and ratio of female patients at intake has reached the highest level since the Foundation's inception in 1953. Sub-studies of female alcoholics tend to refute the generally held belief that they present more difficult problems and are less responsive to treatment.

Table 5: MEAN AGE

	1958	1959
Male	38.5 yrs.	39.1 yrs.
Female	30.7 yrs.	38.3 yrs.

No statistically significant conclusions can be drawn from the minor variations in patients' mean age over the years. The age group distribution of patients from inception to date reveal approximately:

13%	age 29 and under
40%	age 30 to 39
33%	age 40 to 49
14%	age 50 and over

Table 6: MARITAL STATUS

	1958	1959
Single	15.2%	17.7%
Married	66.9%	60.3%
Divorced/Separated	16.3%	20.2%
Widowed	1.6%	1.8%

The ratios of patients by marital status has returned to the long term norm following the variation noted in 1958.

Table 7: VOCATIONAL LEVEL (Regular)

	1958		1959
Prof./Exec./Man.	19.9%	Professional	5.3%
High Skilled	20.2%	Exec./Man.	9.0%
Semi Skilled	20.1%	Supervisory	5.3%
Sales-Clerical	16.2%	High Skilled	22.9%
Agricultural	2.2%	Semi Skilled	34.0%
General Labor	21.4%	Unskilled	16.0%
		Housewife	7.5%

Although the classifications used in 1959 may not appear to vary greatly from those accepted in previous years, a new standard of definition for future reporting renders the data not strictly comparable. By whatever standard used there is evidence that alcoholics seeking Foundation service include substantial proportions of persons with good to high level employment potential.

Table 8: EMPLOYMENT STATUS

	1958	1959
Employed	59.9%	59.9%
Unemployed	40.1%	40.1%

The ratio of employed to unemployed patients has shown remarkable consistency over the past four years. Only in the first two years of operation were unemployed applicants for treatment in the majority.

Table 9: SOURCE OF REFERRAL

	1958	1959
General Publicity	15.8%	12.4%
A.A.	26.2%	25.4%
A.F.A. Patient	12.8%	19.0%
Employer/Supervisor	6.7%	4.7%
Medical	18.0%	15.3%
Clergy	6.0%	3.4%
Legal	2.7%	2.1%
Agency	9.4%	14.0%
Penal	-----	0.5%
Other	2.4%	3.2%

Alcoholics Anonymous continues to maintain its position as the largest single source of patient introduction to Foundation services, while a steady increase in the proportion of intake referred by 'agencies' and former patients may be noted.

Activities by Counselling and Medical staff, with and on behalf of patients are reflected in the following tables:

	1959	1953-1959
Interviews	5819	39,674
Group Counselling Sessions	315	2,027
Staff/Psychiatrist Consultations re patients	91	535
Staff Conferences re patients	509	2,617

Medical Activities	1959	1955-1959
Individual Patients Seen	629	3,229
Doctor/Patient Interviews	358	2,452
Patient/Nurse Interviews	851	6,091
Physical Examinations	216	1,218

Educational services to the community have been intensified as reflected by the following table:

	1958	1959
Public Talks	146	202
Attendance	6,461	8,744
Literature Distributed	22,674	19,980
Periodicals	----	22,498
Radio & TV Programs	12	23

In addition to substantial increases in the number of public talks and use of Radio/TV media to improve public awareness and understanding of alcoholism, the Foundation has established three new publications: Progress, News Review, and Digest on Alcohol Studies on Alcoholism. These are described on page 13.

THE ALCOHOLISM FOUNDATION OF ALBERTA

January 1, 1959 - - December 31, 1959

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Mr. Justice S. Bruce SmithVice-President
Mr. George L. CrawfordVice-President
Mr. D.S. MacdonaldHonorary Secretary
Mr. Wm. NewbiggingHonorary Treasurer
Mr. J. George StrachanExecutive Director
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Dr. C.W. Nash, Edmonton
Dr. D.E. Smith, Edmonton
Mr. W.E. Wilby, Edmonton

AUDITORS....Nash & Nash, Chartered Accountants

PERSONNEL

(as of May 1, 1960)

Aldridge, Mrs. W.M.	Counsellor	Edmonton
Bell, Dr. David M.	Associate Director, Medical Services	Edmonton
Bellwood, Mrs. J.	Receptionist - Stenographer	Calgary
Bliss, Mr. J.D.M.	Supervisor of Treatment	Calgary
Carson, Dr. G.D.	Psychiatric Consultant	Edmonton
Coffey, Mr. T.G.	Editor	Edmonton
Cuthbertson, Miss E.M.	Counsellor	Edmonton
Dickey, Mr. C.R.	Information Officer	Edmonton
Dorris, Mr. R.T.	Counsellor	Edmonton
Fraser, Mr. A.W.	Associate Director, Treatment Services	Edmonton
Fullerton, Mr. J.G.C.	Secretary-Treasurer	Edmonton
Gallaher, Mrs. B.	Stenographer	Calgary
Hanley, Dr. F.W.	Psychiatric Consultant	Calgary
Holloway, Miss C.J.	Stenographer	Edmonton
Horner, Mrs. L.M.	Secretary to the Executive Director	Edmonton
Howell, Mrs. J.N.	Counsellor	Edmonton
Jellinek, Dr. E.M.	Chief Consultant	Edmonton
Jones, Mr. R.W.	Associate Director, Research	Edmonton
Joyce, Miss A.	Nurse	Calgary
Lasserre, Mrs. M.	Counsellor	Calgary
McNeely, Mrs. M.J.	Stenographer	Edmonton
Matheson, Mr. J.P.	Administrative Assistant	Calgary
Mickelson, Miss B.	Receptionist-Stenographer	Edmonton
Nation, Dr. E.W.	Physician	Calgary
Odell, Miss L.	Nurse	Edmonton
Sims, Mrs. V.L.	Secretary	Edmonton
Smart, Mr. H.	Counsellor	Calgary
Stannard, Mrs. I.	Stenographer	Edmonton
Stephenson, Mr. G.E.	Counsellor	Calgary
Stewart, Mr. D.G.	Counsellor	Edmonton
Stobee, Miss E.	Clerk Typist	Edmonton
Strachan, Mr. J. George	Executive Director	Edmonton
Wilby, Mr. W.E.	Research Associate	Edmonton

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ALCOHOLISM FOUNDATION OF ALBERTA
ANNUAL PROGRESS REPORT/

SERIAL MI 40815808 HSS



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THE FOUNDATION'S APPROACH TO ALCOHOLISM

1. The Foundation recognizes alcoholism as a treatable illness and as a public health problem of first magnitude, and therefore, a public responsibility.
2. The Foundation regards the alcoholic as a sick person who can be helped and who is well worth helping.
3. The Foundation's approach is professional and non-controversial. It takes the side of neither the "wets" nor the "drys".
4. The Foundation is concerned with problem drinking and primarily with the illness, alcoholism.
5. The Foundation deals with the problems of alcohol only as they are related to problem drinking.
6. The Foundation's long range goal is the prevention of problem drinking and alcoholism through its three-point program: Education, Treatment, and Research.

Date Due

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		FEB 7 '63				
		FEB 20 '63				
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Alcoholism Foundation
of Alberta.

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6th, 1959

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